

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	<i>4/13/00</i>
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>68608</i>	<i>4-19-00</i>
FORMALITY REVIEW	<i>[Signature]</i>	<i>10</i>	<i>6/26/00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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